FROM :RIDGELAND FAMILY DENTISTRY FAX NO. :6018563175 Jul. 21 2003 08:38AM P2

Please type a plus sign in the	his box:	<u>-</u>		Approve	d for use through	PTO/SB/01 (3-97) 6/30/98, OMB 0651-0032
		1 . 4	Patent and T	Frademark Off	fice; US DEPART	MENT OF COMMERCE
the Paperwork Reduction Ac			Attorney Docket I		71422-000	
DECLARATION FOR		First Named Inver		Austin Pool	· · · · · · · · · · · · · · · · · · ·	
UTILITY OR DESIGN PATENT APPLICATION			COMPLETE IF KNOWN			
PATENT APPLICATION				COMITEE	ILII WALL	
			Application No.			
Declaration Declaration			Filling Date			
submitted with or	sub	mitted after	Group Art Unit			
initial filing	ini	ial filing	Examiner Name			
As a below named inventor, I hereby declare that:						
As a below named in	iventor, i nere	by deciare ina	1;			
My residence, post o	Clina oddrase	and aitizenshi	in are as stated helms	next to m	v name	
l Mry residence, post o	mice adaress,	and chizensin	ip are as statest below	ilext to in	y manie.	
I believe I am the ori	oinal first and	sole inventor	tonly if one name is i	listed belov	w) or an origin	ial, firstand joint
inventor (if plural na	mes are listed	helow) of the	subject matter which	is claimed	and for whic	h a patent is sought
on the invention enti	itled:	17071077 01 1170	240,000 IIIM			r
ADJUSTABLE HUNTING TREE STAND						
(Title of the Invention)						
the specification of v	which	[• •	ne of me mronnon,			
is attached h						
or	icicio					
		as United S	tates Application Nu	mber or P	CT Internation	nal Application
Number:		and was amer	nded on	(if a	applicable).	
I hereby state that I	have reviewed	and understa	nd the contents of the	e above id	entified speci:	fication, including
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.						
·		-	•			
I acknowledge the di	uty to disclose	ir:formation v	vhich is material to p	atentability	y as defined ir	Title 37, Code of
Federal Regulations	§ 1.56.					
I hereby claim foreig	n priority ben	effits under Tit	le 35, United States C	Ode §119	(a)(d) of any f	oreign
application(s) for par	tent or invento	r's certificate.	or § 365(a) of any Pe	CT interna	tional applicat	ion which
designated at least o	me country of	er than the U:	nited States of Amer	ica, lis te d l	below and hav	e also identified
below, by checking t	the box, any fo	erdign applicat	ion for patent or inve	entor's cert	tificate, or of a	iny PCT
			ore that of the applica			
Prior Foreign Applica	ation	Country	Foreign Filing Date	Priority		tified Copy Attached
Number(s)			(MM/DD/YY)	Not Claim	nea YES	NO
		·			\dashv \boxminus	H
[L'and an array	 	DTO/SD/SS	\	
			lemental priority data sheet			
I hereby claim the benefit under Title 35, United States Code \$119(c) of any United States provisional application(s) listed below.						
		Filing Date (MM/DD/YY) [sional application
						d on a supplemental
60/319,482		0	8/21/02	priority data sheet PTO/SB/02B		
		9/20/02				

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PTO/SB/01 (3-97)

P.03/04

FROM : RIDGELAND FAMILY DENTISTRY FAX NO. :6018563175 Jul. 21 2003 08:38AM P3

> ... Please type a plus sign in this box: Approved for use through 6/30/98. OMB 0651-0032 Patent and Trademark Office; US DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are equived to respond to a collection of information unless it displays a valid OMB control number. DECLARATION - Utility Or Design Patent Application United below and, insofar as the subject matter of each of the day no disclosed in the prior United States of PCT International application in the matter of each of the day no disclosed in the prior United States of PCT International application in the matter provided by the first paragraph of Title 35. United States Code 3112, I acknowledge the day, to disclose information which is material to palentability as defined in Title 37, Code of Federal Regulations \$ 1.50 which became available between the filling date of the prior amplication and the national or PCT international filling date of this application Parent Patent Number PCT Parent Parent Filing Date U.S Parent Application (if applicable) (MM/DD/YYYY) Number Number Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto. As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: Customer Number 20915 Place Customer Number Bar Code ☐ Registered practitioner(s) tame/registration number listed below Label Here Registration No. Name Name Registration No. 42,228 G. Thomas Williams 22,360 John E. McGarry 50,859 Michael F. Kelly 33,356 Joel E. Bair 37.118 Mark A. Davis ☐ Additional registered practitioner(s) named in supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto. 20915 or Correspondence Address below Direct all correspondence to Castomer Number or Bar Code Label G. Thomas Williams, Reg. No. 42,228 Name McGarry Bair PC 171 Monroe Avenue, NW, Suite 600 Address Grand Rapids, Michigan 49503 City, State, Zip Telephone 616-742-3500 616-742-1010 US Country Thereby declare that all statements made herein of my over knowledge are true and that all statements made on information and belief are believed to be true; and further that those statements were made with the knowledge that willful take statements and the Fkr so nace are puntabable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements rosy i opardize the valuativ of the application or any patent issued thereon A petition has been filed for this unsigned inventor. Name of Sole or First Inventor Family Name or Surname Given Name (first and middle [if any]) Poole Austin Dated Inventor's Signature US Citizenship US MSCountry Residence: City State Jackson Post Office Address 4344 Auducott Park Lane US 39211 City Jacksen State Zip Country

Additional inventors are being named on the 1 supplemental additional inventor(s) sheet(s) PTO/SB/02A attached hereto.

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Jul. 21 2003 08:39AM P4

FROM : RIDGELAND FAMILY DENTISTRY FAX NO. :6018563175

PTO/\$B/02A (3-97) 4-Please type a plus sign in this box: Approved for use through 6/30/98. OMB 0651-0032
Patent and Trademark Office; US DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. A petition has been filed for this unsigned inventor Name of Inventor Family Name or Surname Given Name (first and maidle [if any]) VanDevender William Dated Inventor's Signature Citizenship US Country State Residence: City Jacks or Post Office Address 4025 Eastover Drive US MSZip 39211 Country State City Jackson A petition has been filed for this unsigned inventor Name of Inventor Family Name or Surname Given Name (first and middle lif anyl) Dated Inventor's Signature England Citizenship State Country Residence: City Post Office Address Country Zip City State A petition has been filed for this unsigned inventor Name of Inventor Family Name or Surname Given Name (first and middle [if a y]) Dated Inventor's Signature State Country Citizenship Residence: City Post Office Address Zip Country City State A petition has been filed for this unsigned inventor Name of Inventor Family Name or Surname Given Name (first and midele [if ar y]) Dated Inventor's Signature Citizenship State Country Residence: City Post Office Address State Country Zip City

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